

Terms of reference for the Healthcare Commission's review of the quality of care provided by independent sector treatment centres

Following the Health Select Committee's inquiry into independent sector treatment centres (ISTCs), on April 26th 2006, the Secretary of State, Patricia Hewitt announced that the Healthcare Commission would carry out a review of the quality of care provided by ISTCs to patients in the NHS under contracts with the Department of Health. The terms of reference for this review are as follows.

Quality of clinical care and clinical governance

- To review the evidence on the extent to which the quality of clinical care provided by ISTCs is in line with recognised professional and regulatory standards
- To examine the systems and procedures that ISTCs have in place to ensure the quality of the care that they provide
- To review the extent to which the quality of care in ISTCs can be compared with the NHS

The experience of patients

- To review the extent to which patients offered care from an ISTC are able to gain access to information to help them make informed choices about their care
- To review patients' assessment of quality of clinical care and their overall experience of care provided by ISTCs

The impact and interaction of regulatory requirements and the terms of the relevant contracts

- To review the current framework for regulating ISTCs and its impact on the assessment of the quality of care provided by ISTCs
- To review the interrelationship between the regulatory system and the systems that the Department of Health and PCTs have in place for monitoring compliance with contracts

The project team has invited key stakeholder organisations to submit evidence to contribute to the review and continues to welcome input from these organisations.

Update March 2007

Initial data analysis for this review has revealed some significant data quality problems. In order to ensure that this review provides as accurate and current a view as possible, we have decided that we will not produce an interim report

based on this data, and that we will defer our final report until early summer, to allow time for these data quality issues to be resolved.

Update August 2006

The Commission has consulted with a wide range of stakeholder organisations, on the terms of reference for the review of ISTCs. Two key issues emerging from this consultation were:

- That the review should prioritise clinical quality as a key focus on the review
- That comparisons with the NHS should be made on a fair basis, including making adjustments for case mix in any analysis

The Commission is using a variety of methods to collect information for this review. These analyses place a significant focus on clinical quality, and will be robust in the comparisons they make.

The principle methods included in the review are described below.

Analysis of national data and data from Healthcare Commission registration and inspection functions. National data analysis consists of an analysis of Hospital Episode Statistics and Key Performance Indicators (KPIs).

This analysis is focusing on:

- The quality of the nationally returned data
- Overall levels of activity
- Producing descriptive and contextual statistics which describe the activity of the ISTC schemes to date (using HES in conjunction with the KPI data)
- Producing comparative statistics using common indicators of inpatient care, to facilitate comparisons between the NHS acute sector, NHS treatment centres, and ISTCs (using HES). Examples are mortality, readmission rates and numbers of secondary procedures.
- The analysis is looking at overall activity rates for all procedures, as well as probing in detail the data on primary hip and knee procedures, cataract and lens procedures. The analysts are also looking at the feasibility of adding further procedures subject to data quality issues.
- KPI variables include issues such as mortality, returns to theatre, infection rates, emergency readmissions, and repeat procedures.

Healthcare Commission analysts are currently analysing the data that is held within the Commission from the registration and inspection of ISTCs.

This will consist of a review of

- Compliance with National Minimum Standards(NMS)
- Requirements
- Complaints

- ISTC patient surveys
- Clinical governance and audit reports.

This analysis was conducted in advance of fieldwork visits in the autumn and will be refreshed using the most recent data available in spring 2007.

A request for formal submission of **evidence from stakeholder organisations** which provided interim feedback by the end of October. A workshop of key external stakeholders was held in January 2007, to help focus the review team on the forward agenda, and reaching consensus on the way forward in response to the issues identified.

The issues under specific enquiry relate directly to the review's terms of reference, but also focus on specific issues of concern to the recent Health Select Committee, namely:

- Quality of care
- Staffing arrangements
- Organisation of care (care pathways)
- Complaints
- Integration with the NHS

The current **regulatory and contracting arrangements** are being reviewed by the project team using semi structured interviews with Healthcare Commission and DH colleagues and review of contract monitoring documentation. The team will also seek information on monitoring and reporting requirements from ISTC providers and NHS commissioners, as part of the review visit programme.

Visits to provider organisations– were carried out between October and December 2006.

In addition to overall governance arrangements, the project team will be seeking to probe in more detail on the quality of care for hip and knee procedures (as a tracer for inpatient care), and cataract and lens procedures (as a tracer for day case care). The team was supported by clinical advisors on these visits.

12 ISTCs were visited between October and early December 2006. These sites represent all the provider organisations currently operating ISTCs in wave 1, represent a spread of type of establishment (in-patient, day case, mobile, diagnostic), and a geographical spread.

To supplement these visits, the team has sought information from NHS commissioning organisations, and from NHS clinical professional organisations.

The perspective of patients. The review has carried out a postal survey of patients from a sub sample of ISTCs, using an extract from the NHS in-patient survey. In addition, the project team will carry out focus group discussion with

patients including those from seldom heard groups to explore the experience of patients in greater depth.

**Comments on these terms of reference should be sent to:
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